

CLAIMS ONLY						Application Number 10-773900		Filing Date			
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
		Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend		
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Total Indep		5		2							
Total Depend		29		20							
Total Claims		34		22							